• .	PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003 Application or Docker Number 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2												
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)								MALL E	NTITY	OR	OTHER SMALL		
TO	TAL CLAIMS		14				[RATE	FEE]	RATE	FEE	l
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	basic fee	770.00	
TOTAL CHARGEABLE CLAIMS			/ minus 20=		• /			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			7 minus 3 =		• 1			X43=		ОЯ	X86=	8p	
MULTIPLE DEPENDENT CLAIM PRESENT							-145 =		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	 	ОЯ	TOTAL	856	l
CLAIMS AS AMENDED - PART II (Catumn 1) (Cotumn 2) (Cotumn 3)								SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENTA		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 14	Minus	- P	(d)	. —	1 [X\$ 9=		OR	X\$18=		İ
	Independent	. 4	Minus	~~ ~	+	. —	1 I	X43=		ОЯ	X86=		
<u> </u>	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM)	+145=		OR	+290=		
							Ĺ	TOTAL			TOTAL		İ
		(Column 1)		(Colum	no 21	(Column 3)		DDIT. FEE		1011	addit. Fee	L	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	ESY BER KUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 28/	Minus	-2	Q_{-}	<u> - 8</u>	11	XS 9=		ОЯ	XXXX	400	b
	Independent	10	Minus	on /	\	1-610	4 [X43=		ОЯ	322	1200	
L	FIRST PRESE	NTATION OF MIL	ICI PCE DE	ENDENI	COUNT		, [+145=		ОЯ	+290=/	-	H
1	2/27/05	ر کر (((ماریجی ا		Makus	21	(Column 3)		TOTAL DOIT. FEE		OA	ADOIT. (EE	1000 C	199
9	101100	CLAIMS REMAINING AFTER AMENOMENT		(Colum High NUM PREVIO PAID	EST BER SUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Q	Total	· 28	Minus	- \(\alpha\)	8	.0] [X		OR	X		
AMENDMENT	Independent	• / 0	Minus	/	0	• එ		X48º2		OR	XEE		l
Ľ	FIRST PRESE	NTATION OF M	ATIPLE DE	ENDENT	CLAIM		!	+145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "O' in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." All ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								TOTAL		ОЯ	TOTAL ADDIT, FEE		
-	et me "Misheet Mu	mber Previously Pa ber Previously Pai	ad For the Thi	S SPACE i	s less tho	a 3. exter "3."			propriate bo				

FORM PTO-875 (Rev. 1003)

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